Application Data She t

Application Information

Application Type:: Regular Subject Matter:: Utility

Suggested Classification::
Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0

Title:: EQUIPMENT FOR SUPPLYING MOLTEN

METAL TO A CONTINUOUS CASTING

INGOT MOULD

Attorney Docket Number:: 0550-1001-1

Request for Early Publication?:: No Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 3

Small Entity?:: Yes

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::
Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: SIEBO

Middle Name::

Family Name:: KUNSTREICH

City of Residence:: SAINT OUEN

State or Province of Residence::

Country of Residence:: FRANCE

Street of Mailing 27, RUE EUGENE BERTHOUD

Address::

City of Mailing Address:: SAINT OUEN

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-93400

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: MARIE-CLAUDE

Middle Name::

Family Name:: NOVE

City of Residence:: PARIS

State or Province of Residence::

Country of Residence:: FRANCE

Street of Mailing 46, RUE LEMERCIER

Address::

City of Mailing Address:: PARIS

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-75017

Correspondence Information

Correspondence Customer Number::

000466

Representative Information

Representative	Customer	Number::	000466	

Domestic Priority Information

Application::	Continuity Type::	Parent	Parent
		Application::	Filing
			Date::
This application	Continuation-in-part of	10/149,388	6/12/02
10/149,388	National Stage of	PCT/FR01/00263	1/29/01

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority
			Claimed::
FRANCE	00-02501	2/29/00	Yes

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::